

OFFICIAL FILE  
ILLINOIS COMMERCE COMMISSION

FORMAL COMPLAINT

Illinois Commerce Commission  
527 E. Capitol Avenue  
Springfield, Illinois 62701

For Commission Use Only:

Case: 03-0446

ORIGINAL

Regarding a complaint by (Person making the complaint):

Maria VUZUETA

Against (Utility name):

People's Gas

As to (Reason for complaint)

Cut of service

in Chicago Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is

3536 W. Hirsch St

The service address that I am complaining about is

1455 N. Milwaukee

My home telephone is

(773) 395-14-43

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at

(773) 395-14-43

(Full name of utility company)

People's Energy / Gas

to the provisions of the Illinois Public Utilities Act.

(respondent) is a public utility and is subject

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.

Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?

☒ Yes ☐ No

Has your complaint filed with that office been closed?

☒ Yes ☐ No

They didn't  
give me any type  
of help.

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

*This part is explained on the  
notebook papers inside the  
envelop.*

Please clearly state what you want the Commission to do in this case: *I want the workers of people  
gas to show me proofs of irregularities involving the meters  
that were taken from my house in a courtroom. I also want  
them not to associate my brother debt to mine.*

Date: 07-15-2003  
(Month, day, year)

Complainant's Signature *Marcia Blum*

If an attorney will represent you, please give the attorney's name, address, and telephone number.

You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).

#### VERIFICATION

A notary public must witness the completion of this part of the form.

I, Rosa Martinez, first being duly sworn, say that I have read the above petition and know what it says.  
The contents of this petition are true to the best of my knowledge.

(Signature) *Rosa Martinez*

Subscribed and sworn/affirmed to before me on (month, day, year) 15 July 2003

*Rosa Martinez*  
Notary Public, Illinois



**NOTE:** Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.